

February 13, 2008

Mr. David Green Missouri Department of Natural Resources Hazardous Waste Program P.O. Box 176 Jefferson City, Missouri 65102

Dear Mr. Green,

Enclosed you will find the complete Biennial Report for our hazardous waste shipped off site for the year beginning January 01, 2007 and ending December 31, 2007.

Please call me if I can be further assistance or you require further details concerning the Biennial Hazardous Waste Report.

Sincerely,

Don Scowden

Senior Vice President

Sullivan Precision Metal Finishing

dscowden@spmf.com

Phone: 573-468-8049 Ext 102

RECEIVED

FEB 14 2008

Hazardous Waste Program MO Dept. of Natural Resources



MAIL THE COMPLETED FORM	United States Environmental Protection Agency							
TO: The appropriate EPA Regional or State Office.	RCRA SUBTITLE C SITE IDENTIFICATION FORM - 2007							
Reason for Submittal (see instructions on page 9)	A. Reason for Submittal:							
MARK ALL BOX(ES) THAT APPLY	As a component of a First RCRA Hazardous Waste Part A Permit Application. As a component of a Revised RCRA Hazardous Waste Part A Permit Application (Amendment #) As a component of Hazardous Waste Report.							
2. Site EPA ID Number (page 10)	EPA ID Number: MOR000040964							
3. SiteName (page 10)	Site Name: Huggins Metal Finishing Inc. d/b/a Sullivan Precision Metal Finishing Inc.							
Site Location Information	Street Address: 995 North Service Road West	Street Address: 995 North Service Road West						
(page 10)	City, Town or Village: Sullivan	State: MO						
	County Name: FRANKLIN	Zip Code: 63080						
5. Site Land Type (page 10)	Site Land Type: X Private County District Federal Indian Municipal State Other							
6. North American Industry Classification System (NAICS) Code(s) for the	A. 332813 B. D.							
Site (page 10)	C. D.							
7. Site Mailing Address (page 11)	Street or P.O. Box: 995 North Service Road West							
	City, Town or Village: Sullivan							
	State: MO							
	Country: UNITED STATES	Zip Code: 63080						
Site Contact Person (page 11)	First Name: Don MI: L	Last Name: Scowden						
,*	Phone Number: 5734688049 Extension:	Email Address:						
-		dscowden@spmf.com						
9. Operator and Legal	Name of Site's Operator:	Date Became Operator (mm/dd/yyyy):						
Owner of the Site (pages 11 and 12)	James Wand	12/01/2000						
·	Operator Type:	☐ Indian ☐ Municipal ☐ State ☐ Other						
	Name of Site's Legal Owner:	Date Became Owner (mm/dd/yyyy):						
ı.	James Wand	12/01/2000						
	Owner Type:	Indian Municipal State Other						

Page 1 of 16

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Legal Owner (Continued)	district to be so the service had were								
Address	City, Town or Village: Sullivan								
	State: MO								
	Country: UNITED STATES		Zip	Code: 63080					
	" for all activities; complete any additional boxes as instruct	ed. (Se	e inst	ructions on pages 13 to 16)					
A. Hazardous Waste									
Complete all parts	for 1 through 6.								
	rator of Hazardous Waste	Y 🔲 I	NX	2. Transporter of Hazardous Waste					
	s", choose only one of the following - a, b or c. LQG: Greater than 1000 kg/mo (2,200 lbs./mo.) of non-acute hazardous waste; or	ΥXI	N	3. Treater, Storer or Disposer of Hazardous Waste (at your site) Note: A hazardous waste permit is required for this activity.					
	SQG: 100 to 1000 kg/mo (220 - 2,200 lbs./mo.) of non-acute hazardous waste; or	Y 🗌 I	NX	4. Recycler of Hazardous Waste (at your site)					
Ŭ c.	CESQG: Less than 100 kg/mo (220 lbs./mo.) of non-acute hazardous waste	Y 🗌 I	NX	5. Exempt Boiler and/or Industrial Furnace					
In addition, inc	licate other generator activities.		_	a. Small Quantity On-Site					
Y ☐ N ※ d. U	Inited States Importer of Hazardous Waste			Burner Exemption b. Smelting, Melting, and Refining					
Y	fixed Waste (hazardous and radioactive) Generator	Y 🗌 1	NX	6. Underground Injection Control					
B. Universal Waste Ad	ctivities		C.	Used Oil Activities					
Y N X 1. Lar	ge Quantity Handler of Universal Waste (accumulate			Mark all boxes that apply.					
	00 kg or more) [refer to your State regulations to	Y	NX	1. Used Oil Transporter					
	ermine what is regulated]. Indicate types of universal ste managed at your site. Mark all boxes that apply:			If "Yes", mark each that applies.					
	φ, ,			a. Transporter					
	Managed			b. Transfer Facility					
a B	atteries	Y	NX	2. Used Oil Processor and/or Re-refiner					
	esticides			If "Yes", mark each that applies. a. Processor					
c. Ti	hermostats			b. Re-refiner					
d. La	amps	YF] NI√	3. Off-Specification Used Oil Burner					
e. O	ther (specify)								
f. Ot	her (specify)	YL	NX	4. Used Oil Fuel Marketer If "Yes", mark each that applies.					
g. O	ther (specify)			a. Marketer Who Directs Shipment of Off-Specification Used Oil to Off-Specification Used Oil Burner					
	stination Facility for Universal Waste e: A hazardous waste permit may be required for this activity.			b. Marketer Who First Claims the Used Oil Meets the Specifications					

11. Description o	f Hazardous Wa	stes (se	ee instructions o	n page 17)	<u> </u>		
A. Waste Codes f List them in the	or Federally Reg order they are p	gulated resented	Hazardous Wast in the regulations	es. Please list the (e.g., D001, D003,	ne waste codes of the Fede F007, U112). Use an addi	eral hazardous wastes h	nandled at your site. des are needed.
D001	D002	690	D007	D035	F003	F005	F019
2							
B. Waste Codes f wastes handled at y					Please list the waste o	codes of the State-regulage if needed for more	ated hazardous waste codes.
MO							
					,		
							
12. Comments (se	ee instructions of	on page	17)				
							4 1
accordance wit of the person o to the best of m including the po	h a system desig r persons who m ny knowledge and	ned to a anage th belief, t	ssure that qualified e system, or those	d personnel properly e persons direcly re complete. I am awa	nents were prepared under y gather and evaluate the i sponsible for gathering the are that there are significar	nformation submitted. Be information, the information.	lased on my inquiry ation submitted is.
		1			2		
Signature of ow or an authorized			Na	me and Official Tit	le (type or print)		Date Signed (mm/dd/yyyy)
Non Da	me I Dim	Don	L Scowden,	, VP / Gen	Mgr.		02/11/2008
Mart A R	ime R	Mar	ty L Bunch,	Ops Direc	tor		02/11/2008
				ī			8
		-					

BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL OR ENTER: U.S. ENVIRONMENTAL PROTECTION AGENCY SITE NAME: Huggins Metal Finishing Inc. 2007 Hazardous Waste Report **FORM WASTE GENERATION** EPA ID NO: MOR000040964 GM AND MANAGEMENT Instructions: Please see the detailed instructionson pages 18 to 26 of the instructions and forms booklet before completing this form. Waste A. Sec. 1 Paint Filters Description B. EPA Hazardous Waste Codes C. State Hazardous Waste Codes D007 D035 F003 F005 MO D. Source Code E. Form Code F. Quantity Generated in 2007 G. UOM G06 1 Density Management Method Code for Source 12,177.000000 Code G25 lbs/gal Sec. 2 Was any of this waste managed on-site? (pages 24 and 25) Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1) X No (SKIP TO SEC. 3) ON-SITE PROCESS SYSTEM 1 **ON-SITE PROCESS SYSTEM 2** On-site Management Quantity treated, disposed or On-site Management Quantity treated, disposed or Method Code recycled on-site in 2007 Method Code recycled on-site in 2007 A. Was any of this waste shipped off-site in 2007 for treatment, disposal or recycling? (pages 25 and 26) Sec. 3 X Yes (CONTINUE TO BOX B) No (FORM IS COMPLETE) B. EPA ID No. of facility to which waste was C. Off-site Management Method Code D. Total quantity shipped in 2007 Site 1 Shipped to ARD981057870 H061 12,177.000000 B. EPA ID No. of facility to which waste was C. Off-site Management Method Code Site 2 D. Total quantity shipped in 2007 shipped Shipped to B. EPA ID No. of facility to which waste was C. Off-site Management Method Code D. Total quantity shipped in 2007 Site 3 shipped Shipped to Comments:

BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL OR ENTER: U.S. ENVIRONMENTAL PROTECTION AGENCY SITE NAME: Huggins Metal Finishing Inc. 2007 Hazardous Waste Report FORM WASTE GENERATION EPA ID NO: MOR000040964 GM AND MANAGEMENT Instructions: Please see the detailed instructionson pages 18 to 26 of the instructions and forms booklet before completing this form. Waste A. Sec. 1 Paint/Solvent Description B. EPA Hazardous Waste Codes C. State Hazardous Waste Codes D001 D007 D035 F003 F005 MO D. Source Code E. Form Code F. Quantity Generated in 2007 G. UOM 1 G06 Density Management Method Code for Source 8,259.000000 Code G25 lbs/gal sg Sec. 2 Was any of this waste managed on-site? (pages 24 and 25) Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1) No (SKIP TO SEC. 3) **ON-SITE PROCESS SYSTEM 1 ON-SITE PROCESS SYSTEM 2** On-site Management Quantity treated, disposed or On-site Management Quantity treated, disposed or Method Code recycled on-site in 2007 Method Code recycled on-site in 2007 Sec. 3 A. Was any of this waste shipped off-site in 2007 for treatment, disposal or recycling? (pages 25 and 26) X Yes (CONTINUE TO BOX B) No (FORM IS COMPLETE) B. EPA ID No. of facility to which waste was C. Off-site Management Method Code D. Total quantity shipped in 2007 Site 1 shipped Shipped to ARD981057870 H061 8,259.000000 B. EPA ID No. of facility to which waste was C. Off-site Management Method Code D. Total quantity shipped in 2007 Site 2 shipped Shipped to B. EPA ID No. of facility to which waste was C. Off-site Management Method Code D. Total quantity shipped in 2007 Site 3 shipped Shipped to Comments:

E .	COPYING FORM, ATTACH SITE OR ENTER: ME: Huggins Metal Finis		FORM	PROTE	NVIRONMENTAL ECTION AGENCY ardous Waste Report E GENERATION					
EPA ID N	NO: MOR000040964	4	GM		MANAGEMENT					
	Instructions: Please see the detailed instructionson pages 18 to 26 of the instructions and forms booklet before completing this form.									
Sec. 1 A. Waste Non Fuels F019 Filter Cake Description										
В. ЕРАН	lazardous Waste Codes F019	C. State Hazardous Wa	ste Codes							
D. Source	Code G06	F. Quantity Generated in	2007	G. UOM 1						
	Management Method Code for Source Code G25	-	11,52	Density 11,528.000000 lbs/gal sg						
Sec. 2	Sec. 2 Was any of this waste managed on-site? (pages 24 and 25) Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1) X No (SKIP TO SEC. 3)									
1900 N. 1900 C. 1900 N.	PROCESS SYSTEM 1 anagement Quantity treated recycled on-site	2 000	ON-SITE PROCESS SY On-site Management Method Code							
Sec. 3 A. Was any of this waste shipped off-site in 2007 for treatment, disposal or recycling? (pages 25 and 26) X Yes (CONTINUE TO BOX B) No (FORM IS COMPLETE)										
Site 1	B. EPA ID No. of facility to which was shipped ARD981057870	Management Method Cood to H141	e D. Total quantity	D. Total quantity shipped in 2007 11,528.000000						
Site 2	B. EPA ID No. of facility to which was shipped	Management Method Cood to								
Site 3 B. EPA ID No. of facility to which waste was shipped C. Off-site Management Method Code Shipped to D. Total quantity shipped in 2007										
Comments	5 ;									

BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL OR ENTER:								NVIRONMENTAL ECTION AGENCY	
SITE NA	ME: Huggins Metal Finis	shing l	Inc.			;	2007 Haz	ardous Waste Report	
EPA ID NO: MOR000040964					FORM GM	WASTE GENERATION			
Instru compl	ctions: Please see the detailed in leting this form.	struction	son pages	18 to	26 of the instru	ictions and	forms b	ooklet before	
Sec. 1	A. Waste Non Fuels Et Description	ching :	Sludge				9)	
B. EPA Hazardous Waste Codes D002 C. State Hazardous Waste Code					aste Codes				
					MO				
D. Source	urce Code E. Form Code F				antity Generated i	n 2007		G. UOM 1	
	Management Method Code for Source Code G25				Density				
						0 %		lbs/galsg	
Sec. 2	Sec. 2 Was any of this waste managed on-site? (pages 24 and 25) Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1) X No (SKIP TO SEC. 3)								
ON-SITE I	PROCESS SYSTEM 1	***************************************		ON-SI	TE PROCESS SY	STEM 2			
The state of the s				site Management Quantity treated, disposed or hod Code recycled on-site in 2007					
Sec. 3 A. Was any of this waste shipped off-site in 2007 for treatment, disposal or recycling? (pages 25 and 26) X Yes (CONTINUE TO BOX B) No (FORM IS COMPLETE)									
Site 1	B. EPA ID No. of facility to which waste was shipped C. Off-site Shipped				ement Method Cod	hod Code D. Total quantity shipped in 2007			
	ARD981057870			H14	1	13,232.000000		13,232.000000	
Site 2	B. EPA ID No. of facility to which waste was shipped C. Off-site M Shipped to				ement Method Cod	de D. Tota	I quantity s	shipped in 2007	
Site 3	Site 3 B. EPA ID No. of facility to which waste was shipped C. Off-site Ma Shipped to				gement Method Code D. Total quantity shipped in 2007				
Comments	5:		я в						

BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION U.S. ENVIRONMENTAL LABEL OR ENTER: **PROTECTION AGENCY** SITE NAME: Huggins Metal Finishing Inc. 2007 Hazardous Waste Report **FORM WASTE GENERATION** MOR000040964 EPA ID NO: GM AND MANAGEMENT Instructions: Please see the detailed instructionson pages 18 to 26 of the instructions and forms booklet before completing this form. Waste Sec. 1 Direct Only Titanium Etch Description B. EPA Hazardous Waste Codes C. State Hazardous Waste Codes D002 MO D. Source Code E. Form Code F. Quantity Generated in 2007 G. UOM G03 Density Management Method Code for Source 545.000000 Code G25 lbs/gal Was any of this waste managed on-site? (pages 24 and 25) Sec. 2 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1) No (SKIP TO SEC. 3) ON-SITE PROCESS SYSTEM 1 **ON-SITE PROCESS SYSTEM 2** On-site Management Quantity treated, disposed or On-site Management Quantity treated, disposed or Method Code recycled on-site in 2007 Method Code recycled on-site in 2007 A. Was any of this waste shipped off-site in 2007 for treatment, disposal or recycling? (pages 25 and 26) Sec. 3 X Yes (CONTINUE TO BOX B) No (FORM IS COMPLETE) B. EPA ID No. of facility to which waste was C. Off-site Management Method Code D. Total quantity shipped in 2007 Site 1 shipped Shipped to ARD981057870 H141 545.000000 B. EPA ID No. of facility to which waste was C. Off-site Management Method Code D. Total quantity shipped in 2007 Site 2 shipped Shipped to B. EPA ID No. of facility to which waste was C. Off-site Management Method Code D. Total quantity shipped in 2007 Site 3 shipped Shipped to Comments:

BEFORE COPYING FORM, ATTACH SITE LABEL OR ENTER:					NVIRONMENTAL ECTION AGENCY			
SITE NAME: Huggins Metal Fini			–	2007 Haz	ardous Waste Report			
EPA ID NO: MOR000040964			FORM GM			E GENERATION MANAGEMENT		
Instructions: Please see the detailed in completing this form.	struction	son pages	18 to	26 of the ins	tructio	ons and forms b	ooklet before	
Sec. 1 A. Waste Non Fuels Stainless Steel Etch Description								
B. EPA Hazardous Waste Codes D002 C. State Hazardous Waste Codes								
		МО						
Source Code E. Form Code			F. Qua	antity Generate	ed in 200	07	G. UOM 1	
Management Method Code for Source	Management Method Code for Source			Density			Density	
Code G25							☐lbs/gal ☐sg	
Sec. 2 Was any of this waste managed on-site? (pages 24 and 25) Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1) X No (SKIP TO SEC. 3)								
ON-SITE PROCESS SYSTEM 1			ON-SI	TE PROCESS	SYSTE	M 2		
On-site Management Quantity treated recycled on-site		-site Management Quantity treated, disposed or thod Code recycled on-site in 2007						
Sec. 3 A. Was any of this waste shipped off-site in 2007 for treatment, disposal or recycling? (pages 25 and 26) X Yes (CONTINUE TO BOX B) No (FORM IS COMPLETE)								
Site 1 B. EPA ID No. of facility to which was shipped	B. EPA ID No. of facility to which waste was C. Off-site N			agement Method Code D. Total quantity shipped in 2007			hipped in 2007	
ARD981057870	ARD981057870		H141	41		581.000000		
Site 2 B. EPA ID No. of facility to which wast shipped				ement Method (Code	de D. Total quantity shipped in 2007		
Site 3 B. EPA ID No. of facility to which waste was shipped C. Off-site Management Method Code Shipped to D. Total quantity shipped in 2007						hipped in 2007		
Comments:	I .							

BEFORE COPYING FORM, ATTACH SITE IDEN LABEL OR ENTER: SITE NAME: Huggins Metal Finishin EPA ID NO: MOR000040964			ORM GM	PROTE 2007 Haz WAST	NVIRONMENTAL ECTION AGENCY ardous Waste Report E GENERATION MANAGEMENT		
Instructions: Places are the detailed in the							
Instructions: Please see the detailed instructions completing this form.	tionson pages	18 to 26 of	the instruct	tions and forms b	ooklet before		
Sec. 1 A. Waste Direct Only Dich	iromate Sea	1	2				
B. EPA Hazardous Waste Codes D007 C. State Hazardous Waste Codes							
		MO					
D. Source Code G03	F. Quantity 0	Senerated in 2	2007	G. UOM 1			
Management Method Code for Source Code G25					19,194.000000 Density		
Sec. 2 Was any of this waste managed on-site? (p Yes (CONTINUE TO ON-SITE PROC X No (SKIP TO SEC. 3)							
On-site Management Quantity treated, disposed or			N-SITE PROCESS SYSTEM 2 n-site Management Quantity treated, disposed or recycled on-site in 2007				
Sec. 3 A. Was any of this waste shipped off-site in 2007 for treatment, disposal or recycling? (pages 25 and 26) X Yes (CONTINUE TO BOX B) No (FORM IS COMPLETE)							
Site 1 B. EPA ID No. of facility to which waste was shipped	C. Off-site Shipped	Management I	Method Code	D. Total quantity s	hipped in 2007		
ARD981057870				19,194.000000			
Site 2 B. EPA ID No. of facility to which waste was shipped			nagement Method Code D. Total quantity shipped in 2007				
Site 3 B. EPA ID No. of facility to which waste was shipped	Management M to	Method Code	D. Total quantity s	hipped in 2007			
Comments:	•	e e e e e e e e e e e e e e e e e e e	2		-		

FORM GM OMB#: 2050-0024 Expires 11/30/2009 BEFORE COPYING FORM, ATTACH SITE ILENTIFICATION LABEL OR ENTER: U.S. ENVIRONMENTAL PROTECTION AGENCY SITE NAME: Huggins Metal Finishing Inc. 2007 Hazardous Waste Report **FORM WASTE GENERATION** EPA ID NO: MOR000040964 **GM** AND MANAGEMENT Instructions: Please see the detailed instructionson pages 18 to 26 of the instructions and forms booklet before completing this form. Waste Sec. 1 Direct Only Deox Description B. EPA Hazardous Waste Codes C. State Hazardous Waste Codes D002 D007 MO D. Source Code E. Form Code F. Quantity Generated in 2007 G. UOM 1 G03 Density Management Method Code for Source 25,156.000000 Code G25 lbs/gal sq Was any of this waste managed on-site? (pages 24 and 25) Sec. 2 Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1) No (SKIP TO SEC. 3) ON-SITE PROCESS SYSTEM 1 **ON-SITE PROCESS SYSTEM 2** On-site Management Quantity treated, disposed or On-site Management Quantity treated, disposed or Method Code recycled on-site in 2007 Method Code recycled on-site in 2007 A. Was any of this waste shipped off-site in 2007 for treatment, disposal or recycling? (pages 25 and 26) Sec. 3 X Yes (CONTINUE TO BOX B) No (FORM IS COMPLETE) B. EPA ID No. of facility to which waste was C. Off-site Management Method Code D. Total quantity shipped in 2007 Site 1 shipped Shipped to ARD981057870 H141 25,156.000000 B. EPA ID No. of facility to which waste was C. Off-site Management Method Code D. Total quantity shipped in 2007 Site 2 shipped Shipped to B. EPA ID No. of facility to which waste was C. Off-site Management Method Code D. Total quantity shipped in 2007 Site 3 shipped Shipped to

Comments:

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BEFORE COPYING FORM, ATTACH SITE IDENTIFICATION LABEL OR ENTER:							ENVIRONMENTAL FECTION AGENCY	
SITE NA	SITE NAME: Huggins Metal Finishing Inc.					2007 H	azardous Waste Report	
EPA ID NO: MOR000040964				FORM GM	1000000	TE GENERATION MANAGEMENT		
	Instructions: Please see the detailed instructionson pages 18 to 26 of the instructions and forms booklet before completing this form.							
Sec. 1	Sec. 1 A. Waste Direct Only Chromic Acid							
В. ЕРАН	B. EPA Hazardous Waste Codes D002 D007 C. State Hazardous Waste Codes							
χ.					MO			
D. Source	Code G03	E. Form C	Code	F. Qu	uantity Generated i	n 2007	G. UOM 1	
							Density	
1	Management Method Code for Source Code G25				30,878.000000			
Sec. 2	Sec. 2 Was any of this waste managed on-site? (pages 24 and 25) Yes (CONTINUE TO ON-SITE PROCESS SYSTEM 1) No (SKIP TO SEC. 3)							
CONTROL OF CHECKMENTS OF A	PROCESS SYSTEM 1	d disposed	or	200.0000 100	ITE PROCESS SY	NAME OF TAXABLE PARTY.	eated, disposed or	
					thod Code recycled on-site in 2007			
Sec. 3	A. Was any of this waste shipped of X Yes (CONTINUE TO BOX B)		7 for treatm			? (pages 25 and 26)		
Site 1	B. EPA ID No. of facility to which was		C. Off-site	Manag	gement Method Co	de D. Total quanti	ty shipped in 2007	
	Shipped Shipped ARD981057870		H14	11	30,878.000000			
Site 2	2 B. EPA ID No. of facility to which waste was shipped C. Off-site Shipped			agement Method Code D. Total quantity shipped in 2007		ty shipped in 2007		
Site 3 B. EPA ID No. of facility to which waste was shipped C. Off-site Management Method Code Shipped to D. Total quantity shipped in 2007					ty shipped in 2007			
Comments	5:							

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BEFORE COPYING FORM, ATTACH SITE SENTIFICATION LABEL OR ENTER:				
SITE NAME: Huggins Metal Finishing Inc.				
EPA ID NO: MOR000040964				
Instructions: Please read the detailed instructions on the re				



FORM OI

U.S. ENVIRONMENTAL PROTECTION AGENCY

2007 Hazardous Waste Report

OFF-SITE IDENTIFICATION

Instructions: Please read the detailed ins	structions on t	he reverse side before completing this form.	
Site 1 A. EPA ID No. of off-site installation or tra	ansporter	B. Name of off-site installation or transporter	
ARD981057870		Rinco	
C. Handler type (CHECK ALL THAT APPLY)	D. Address of	off-site installation	
Generator	Street	NA	
X Transporter	City		State
TSDR facility	Zip		
Site 2 A. EPA ID No. of off-site installation or tra	ansporter	B. Name of off-site installation or transporter	
C. Handler type (CHECK ALL THAT APPLY)	D. Address of	off-site installation	
Generator	Street		
Transporter	City		State
TSDR facility	Zip	W1	Otate
Site 3 A. EPA ID No. of off-site installation or tra	insporter	B. Name of off-site installation or transporter	
C. Handler type (CHECK ALL THAT APPLY)	D. Address of	off-site installation	
Generator	Street		
Transporter	City		State
TSDR facility	Zip		
Site 4 A. EPA ID No. of off-site installation or tra	nsporter	B. Name of off-site installation or transporter	,
C. Handler type (CHECK ALL THAT APPLY)	D. Address of	off-site installation	
Generator	Street		
Transporter	City	w.	State
TSDR facility	Zip		
Site 5 A. EPA ID No. of off-site installation or tra	nsporter	B. Name of off-site installation or transporter	
C. Handler type (CHECK ALL THAT APPLY)	D. Address of	off-site installation	
Generator	Street		
Transporter	City		State
TSDR facility	Zip		
Comments:			
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